



County of San Bernardino

F A S

CONTRACT TRANSMITTAL

FOR COUNTY USE ONLY

<input type="checkbox"/> New <input checked="" type="checkbox"/> Change <input type="checkbox"/> Cancel	Vendor Code	SC	Dent. PHL	A	Contract Number 01-899 A3
County Department Public Health			Dept. PHL	Orgn. PHL	Contractor's License No.
County Department Contract Representative Alexander Taylor			Telephone 388-5727		Total Agreement Amount \$697,500
Contract Type <input checked="" type="checkbox"/> Revenue <input type="checkbox"/> Encumbered <input type="checkbox"/> Unencumbered <input type="checkbox"/> Other:					
If not encumbered or revenue contract type, provide reason:					
Commodity Code		Contract Start Date	Contract End Date	Original Amount \$687,500	Amendment Amount \$10,000
Fund AAA	Dept. PHL	Organization 1502	Appr.	Obj/Rev Source 8710	GRC/PROJ/JOB No. Amount \$697.500
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No. Amount
Fund	Dept.	Organization	Appr.	Obj/Rev Source	GRC/PROJ/JOB No. Amount
Project Name HIV/AIDS Surveillance Program MOU			Estimated Payment Total by Fiscal Year		
			FY 01-02	Amount 247,500	I/D
			02-03	225,000	
			03-04	225,000	

CONTRACTOR Department of Health and Human Services

Federal ID No. or Social Security No.

Contractor's Representative Edward Stahlberg, Chief, Program Support Branch

Address 1501 Capitol Avenue, Suite 71.2101, MS 1403, PO box 997413,
Sacramento, California 95899-7413

Phone

Nature of Contract: (Briefly describe the general terms of the contract)

This is Amendment No. 3 to Agreement No. 01-899 in the amount of \$10,00 to ensure the complete and timely reporting of AIDS cases, provide education and training to other health care providers, and provide activities to ensure that state and federal case reporting requirements are met. Additionally, this funding provides for continued participation in a statewide non-names system of HIV reporting for the period July 1, 2001 through June 30, 2004.

(Attach this transmittal to all contracts not prepared on the "Standard Contract" form.)

Approved as to Legal Form (sign in blue ink)

Reviewed as to Contract Compliance

Presented to BOS for Signature

County Counsel (Scott Runyan)

Department Head (James A. Felten)

Auditor/Controller-Recorder Use Only

<input type="checkbox"/> Contract Database	<input type="checkbox"/> FAS
Input Date	Keyed By

Date _____

☐ **Contract Database** ☐ **FAS**

Keyed By